P24000048374

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



000434325170

2024 AUG - 6 PM 3: 47 SECRETA: OF STATE TALL AHASSEE, FL

Ap

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Naples Natives Ele	etric inc	
DOCUMENT NUMI			· · · · · · · · · · · · · · · · · · ·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Shayne E. Luff		
		Name of Contact Person	1
	Naples Natives Electric inc		
		Firm/ Company	
	5166 bBoxwood way		
		Address	
	Naples Florida 34116		
		City/ State and Zip Cod	e
	shayne@nnelectric.net		
		sed for future annual report	notification)
For further information	n concerning this matter, pleas	239	8775274
	of Contact Person	at (de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made		•
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

Naples Natives Electric inc		rILFD
(Name of Corporati	on as currently filed with the	Florida Dept. of State)
524000048374		2024 AUG -6 PM 3: 47
(Досип	nent Number of Corporation (if	KOOWONETANY OF STATE
Pursuant to the provisions of section 607.1006, Florida is Articles of Incorporation:	a Statutes, this <i>Florida Profit C</i>	TALLAHA UT STATE orporation adopts the following amendment(s
. If amending name, enter the new name of the co	orporation:	
		The new
ame must be distinguishable and contain the word "co 'Inc.," or Co.," or the designation "Corp," "Inc, 'chartered," "professional association," or the abbre	" or "Co". A professional c	
B. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADL</u>		
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
. If amending the registered agent and/or register new registered agent and/or the new registered		enter the name of the
Name of New Registered Agent		
•		
·	(Florida street address)	
New Registered Office Address:		. Florida
New Registered Office Address.	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.		the obligations of the position.
6:	atoms of Nov. Besiden J.A.	if abion
Signa	ature of New Registered Agent,	ij cnanging
Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>v</u>	Scott A.Luff	5166 Boxwood way
X Add			Naples fl 34116
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art	these charges here.
(Attach additional sheets, if necessary).	(Ве ѕресіліс)
·	
	
	
	<u> </u>
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the eme	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nament it not contained in the amendment usen.
(y not applicable, unateute 1411)	
	·
. <u> </u>	

•

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
· ·		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	·
Note: If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval	
	tor the amendment(s) was/were surricient for approval	
by	(voting group)	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) Shayne E. Luff	
	(Typed or printed name of person signing)	- ,, _ ,
	President	
	(Title of nemon signing)	